

ANNEX II: CAMP ATTERBURY MEDICAL PREREQUISITES – UPDATED 22 JANUARY 2013

In order to expedite mobilization, it is required that the Camp Atterbury (CA) Medical Staff receive all your completed medical forms and documentation at least 14 days in advance of your arrival at Camp Atterbury. You can FAX or scan/e-mail these documents to the following:

FAX your copies to: 1-812-526-1318 (Be sure to use a cover sheet when faxing medical information.)

SCAN/E-MAIL your copies to the following staff members: hayley.coffey@us.army.mil;
Debra.A.Pahl@us.army.mil; carla.sharp1@us.army.mil.

QUICK REFERENCE CHECKLIST

HISTORY AND PHYSICAL (WITHIN 1 YEAR)	
<input type="checkbox"/>	<ul style="list-style-type: none"> If pre-deployment physical performed at a Military Treatment Facility (MTF), use form OF 178 (certification of medical examination) form. If pre-deployment physical performed by private (civilian) physician, use forms DD 2808 (report of medical examination and DD 2807-1 (report of medical history).
Labs: Abnormal Results May Require Repeat of Lab Test All laboratory tests must be completed within 90 days of reporting to Camp Atterbury	
<input type="checkbox"/>	UA: Urinalysis. <ul style="list-style-type: none"> Test must be typed (not handwritten) Must show color, specific gravity, glucose, bilirubin, ketones, blood, pH, protein, nitrites, and leukocytes)
<input type="checkbox"/>	CMP <ul style="list-style-type: none"> Complete metabolic panel If glucose is abnormal, hemoglobin A1c is required.
<input type="checkbox"/>	HEMOGLOBIN A1C <ul style="list-style-type: none"> If applicable: must be <7.0 If non-diabetic and is over 6.4, further testing, treatments, and deployability issues should be addressed by primary care physician. Glucose test results greater than 110 will require hemoglobin A1c
<input type="checkbox"/>	CBC <ul style="list-style-type: none"> Complete blood count
<input type="checkbox"/>	HIV <ul style="list-style-type: none"> Within 120 days of reporting to Camp Atterbury
<input type="checkbox"/>	DNA <ul style="list-style-type: none"> Must be taken at CAJMTC
<input type="checkbox"/>	G6PD <ul style="list-style-type: none"> Require formal documentation of results.
<input type="checkbox"/>	Blood type <ul style="list-style-type: none"> Require formal documentation of blood type.
<input type="checkbox"/>	Lipid Panel <ul style="list-style-type: none"> Must take if over 40 Results cannot exceed the following: total cholesterol < 240; LDL<160; triglycerides<500
<input type="checkbox"/>	EKG <ul style="list-style-type: none"> Must be done within 90 days of mobilizing.
<input type="checkbox"/>	PSA <ul style="list-style-type: none"> Must be tested if history of prostate cancer, BPH, or use of medications relating to BPH
<input type="checkbox"/>	Vision <ul style="list-style-type: none"> Submit completed DD Form 771 <u>OR</u> Submit prescription from Optometrist. Do not wear contact lenses while going through medical processing.

<input type="checkbox"/>	Hearing <ul style="list-style-type: none"> • Having hearing test within a year of reporting to Camp Atterbury • Submit completed DD form 2215 OR form 2216 • If H3 is a SPRINT, test is needed for waiver
	IMMUNIZATIONS
	Immunizations must all be completed before arrival. Immunizations must be current; those consisting of a series must be current but do not have to be completed before deployment. However it is the responsibility of the individual to complete the series while on leave or overseas.
<input type="checkbox"/>	Hepatitis A: 1 st dose, 2 nd dose after 6 months.
<input type="checkbox"/>	Hepatitis B: 1st dose, 2 nd dose after 30 days, 3 rd dose after 5 months or titer.
<input type="checkbox"/>	MMR <ul style="list-style-type: none"> • Measles, mumps, and rubella • 1 dose: If no documentation of vaccine, either a titer or vaccine required
<input type="checkbox"/>	Seasonal Influenza: 1 September through 31 May
<input type="checkbox"/>	Typhoid: within 2 years of reporting to Camp Atterbury <ul style="list-style-type: none"> • Oral Typhoid: within 5 years of reporting to Camp Atterbury
<input type="checkbox"/>	Tetanus <ul style="list-style-type: none"> • TDAP is required once • Continue with TD every 10 years
<input type="checkbox"/>	Varicella <ul style="list-style-type: none"> • Chicken pox • 1st dose, 2nd dose after 30 days OR • Laboratory results showing a Varicella titer showing immunity. Must have documentation from a childhood provider or is documented by an immunization (shot) record by a provider.
<input type="checkbox"/>	Tuberculosis Skin Test <ul style="list-style-type: none"> • Often referred to as PPD, to TB tine • Quantiferon Gold, a lab test, is acceptable. • Bring actual lab result completed within 90 days of arrival. If past positive, radiology report from a bi-lateral chest x-ray is needed for a waiver within the last 90 days.
<input type="checkbox"/>	Smallpox: done at CA
<input type="checkbox"/>	Polio (OPV/IPV) <ul style="list-style-type: none"> • Documentation of vaccine. • If negative titer #3 or no history IPV, needs 1 IPV dose of vaccine.
	SPECIFIC CONDITIONS <i>If needed</i>
<input type="checkbox"/>	History of Respiratory Problems: Pulmonary function test may be required
<input type="checkbox"/>	Sleep Apnea <ul style="list-style-type: none"> • Split sleep study • Within 12 months, 30 day compliance, CPAP and battery backup
<input type="checkbox"/>	Abnormal EKG, Cardiac Issue, or Framingham 15% or Greater: stress testing recommended

EXPANDED MEDICAL REFERENCE GUIDE

- *Even if your records are sent to Camp Atterbury ahead of time, bring copies of all forms and results with you.*
- *Bring a **180-day supply** of all of your routine prescription medications with you.*
- *If you wear eyeglasses, bring at least two pair with you and show them to the optometry staff. Contact lenses are **not** authorized for wear in the CENTCOM Theater.*

HISTORY AND PHYSICAL

- Required within 1 year of deployment/CENTCOM Mod 11, 15.C.2.C
- If pre-deployment physical performed at a Military Treatment Facility (MTF) use form **OF 178** (certification of medical examination) form.
- If pre-deployment physical performed by private (civilian) physician, use forms **DD 2808** (report of medical examination and **DD 2807-1** (report of medical history).

LABS

Results must be typed; handwritten results are not acceptable. Abnormal results may need to be repeated or, if still abnormal, require consultation with specialist and supporting testing.

- **Urinalysis**
 - Results must be typed; they may not be handwritten
 - Results must show color, specific gravity, glucose, bilirubin, ketones, blood, pH, protein, nitrites, and leukocytes
- **Complete metabolic panel (CMP)**
- **Glucose**
 - Glucose (blood sugar) must be 110 or below.
 - If above 110, hemoglobin A1C is required.
 - If non-diabetic and is over 6.4, further testing, treatments, and deployability issues should be addressed by primary care physician.
 - If known diabetic, must be below 7.0.
 - If unknown diabetic and is above 6.4, further testing may be required.
 - Known diabetics must have test within 90 days of arrival.
- **Complete blood count (CBC)**
 - White blood count (WBC), red blood count (RBC), hemoglobin, hematocrit, MCV, MCH, MCHC, RDW, RDW, platelets
- **HIV**
 - The HIV laboratory test document must be **negative**, taken within 120 days of arrival at Camp Atterbury, and must be typed, not hand-written.
 - Oral HIV testing can **NOT** be accepted.
 - ***Deployment is not allowed if selectee is HIV positive.***
- **DNA**
 - May be drawn at Camp Atterbury if not already on file
- **G6PD**
 - Blood test; require formal documentation of results.
- **Blood type**
 - Require formal documentation of blood type.
- **Lipid panel**
 - Cholesterol and triglycerides
 - Must be taken within 90 days of arrival
 - Required of all personnel
 - Must include total cholesterol, low density lipoprotein (sometimes referred to as “the bad cholesterol”), and triglycerides
 - Levels cannot exceed the following: total cholesterol 240, triglycerides 500, LDL 160. Anyone at any age treated for hyperlipidemia must have a lipid panel within the ranges above.
- **EKG**
 - Required of all personnel over the age of 40.

- **PSA**
 - Required of all male personnel with a past history of **prostate cancer, BPH, or BPH medications or testosterone use**
- **Framingham Risk Assessment**
 - Required of all personnel over the age of 40
 - The result of this test cannot exceed 15% to be considered deployable. Use the following sites:
 - Framingham Risk Assessment w/o Diabetes
(<http://hp2010.nhlbi.nih.net/atpiii/calculator.asp>)
 - FRAMINGHAM RISK ASSESSMENT WITH DIABETES (takes diabetes into account and the parenthetical can read “with diabetes”) <http://www.uptodate.com/contents/calculator-10-year-risk-of-developing-cardiovascular-disease-in-men-patient-information>

VISION

- If you wear glasses, you must deploy with two pair of glasses (current prescription) and prescription inserts for your protective mask and/or ballistic goggles. We'll order inserts for you.
- Completed DD Form 771 (Eyewear Prescription) **OR**
- Prescription from optometrist (within 1 year of deployment)

HEARING

- DD Form 2215 (Reference Audiogram) or DD 2216 (Hearing Conservation Data)
- Hearing test data must include the audiology operator's certification number and machine type and serial number and calibration date
- Hearing class 3 (“H3”) – severe hearing loss – requires Speech Recognition In Noise Test (SPRINT) or Hearing In Noise Test (HINT).
- SPRINT is available at military medical treatment facilities. HINT is the civilian equivalent
- Hearing tests (audiograms) conducted during the physical must be documented with actual readings and validating information (See **Sensory Disorders**, page 8 below.) “X” is not a valid reading.

IMMUNIZATIONS

- Except as noted, all must be completed BEFORE arrival at Camp Atterbury
- Vaccinations must be documented on a CDC 731 (International Certificate of Vaccination, also known as the “yellow shot card”.) Older versions read PHS 731 but are acceptable.
- Required vaccinations NOT provided by the military
 - Hepatitis A (1st dose, 2nd dose after 6 months)
 - Hepatitis B (1st dose, 2nd dose 30 days, 3rd dose 5 Months)
 - Measles, mumps, and rubella (“MMR”) 1 dose OR Titer to check Immunity
 - Seasonal Influenza (1 September through 31 May)
 - Typhoid (within 2 years) Oral Typhoid (within 5 years)
 - Tetanus- TDAP ONE time, may then go to Td every 10 years
 - Varicella (“Chickenpox”) (1st dose, 2nd dose after 30 days)
 - Documented proof of having had the vaccination on an immunization record, **OR** documentation from a childhood provider. If neither may receive a vaccine booster or laboratory result showing a Varicella Titer
 - Tuberculosis skin testing (Often referred to as PPD, or “TB Tine”)
 - Must be completed within 90 days before arrival at Camp Atterbury
 - Quantiferon Gold, a lab test, is acceptable. Bring the actual lab result with you
 - If history of past positive reading, a radiology report from a Bi-lateral chest x- ray must be completed within 90 days of arriving at Camp Atterbury in order to qualify for CENTCOM waiver

VACCINATIONS OFFERED AT GOVERNMENT EXPENSE AND IF REQUIRED BY CONTRACT

- Anthrax
- Smallpox
- Rabies

MEDICATIONS

- List ALL medications and allergies
- Must have a 180 day supply of medication OR reliable means to obtain refills

DENTAL

- Completed DD Form 2813 (Department of Defense Active Duty/Reserve Forces Dental Examination)
 - Must show you as a Dental Class 1 or 2
 - Must be signed by dentist
 - Must have dentist's state license number (US) unless dentist is military
- Pantographic X-rays are required to be reviewed by dentist and Block 5 of the DD 2813 marked "Yes"

WAIVERS

- Deployees who have a condition, as described in Central Command (CENTCOM) Modification 11, Tab A as a "condition generally precluding deployment" must have a complete waiver, signed by the CENTCOM Surgeon's Office.
- If your local MTF has submitted a waiver through CENTCOM, you must send the signed waiver to the CA Medical Staff and hand-carry a copy with you to Camp Atterbury.
- If a condition is found at CA Medical Processing that the deployee was unaware of, and it is a waivable condition listed in the table below, CA Medical Staff will submit for that specific waiver on behalf of the deployee and his or her organization.

TOP REASONS FOR NON-DEPLOYABILITY OR DELAY IN DEPLOYMENT

OBSTRUCTIVE SLEEP APNEA (OSA)

- Must have a thirty day compliance report from machine
 - Must have 75 % percent compliancy score for greater than 4 hours
 - At least four hours per night for 30 days on average
- Must bring machine and battery back-up to Camp Atterbury for inspection
- Split Sleep study within 12 months

BODY MASS INDEX (BMI)

- Greater than 40 (link to BMI Calculator: <http://nhlbisupport.com/bmi/>)
- Greater than 35 with other the following medical co-factors:
 - Diabetes, obstructive sleep apnea, heart disease, joint disease

POSITIVE PPD

- Must have a waiver
- Must have chest X-ray less than 90 days old
- Proof of counseling
- Or proof of Latent TB treatment by medication for 9 months.

NON-DIAGNOSED DIABETIC, NEWLY DIAGNOSED, OR PRE-DIABETIC

- Non-Diagnosed or Pre Diabetic: Has a hemoglobin A1C of 6.5 or greater
- Needs physicians consult of diagnosis, prognosis, treatment plan, medications if needed
- Newly Diagnosed: Must have a hemoglobin A1C less than 7.0

ABNORMAL EKG OR FRAMINGHAM GREATER THAN 15%

- May need stress testing to clear these issues and/or cardiologist consult

ABNORMAL ASTS AND ALTS FOUND IN THE CMP (LIVER FUNCTION TEST)

- After repeat of CMP or Liver Function Test with abnormal results may need specialist consult and further testing
- May need abdominal ultrasound to exclude liver and gallbladder disease, and hepatitis ABC antibody profile

HEMATURIA (BLOOD IN URINE)

- After repeat of urinalysis with abnormal results may need consultation and testing from an urologist

ABNORMAL LABS

- Must have specialist diagnosis, treatment plan, and medications (if needed), deploy ability to an austere environment for the period of the LOA or Orders without need for follow up, and any further testing.
- Must have a letter typed with letterhead outlining the above finding

CONDITIONS GENERALLY PRECLUDING DEPLOYMENT

The conditions listed on the following pages will disqualify civilian personnel from deploying. The CENTCOM Surgeon's office will entertain waiver requests for any condition, and the request will be either approved or denied. The CA Medical Staff can submit waivers on behalf of deployees. If deploying personnel come to Camp Atterbury with conditions precluding deployment but without the required approved waiver, they may be delayed in deploying. It is always best to have the waiver submitted and approved before coming to Camp Atterbury.

<i>Conditions Generally Precluding Deployment</i>	
	General Conditions/Restrictions <ul style="list-style-type: none">• Conditions that prevent the wear of personal protective equipment, including protective mask, ballistic helmet, body armor, and chemical/biological protective garments• Conditions that prohibit required theater immunizations or medications• Any medical condition that requires frequent clinical visits or ancillary tests, that fails to respond to adequate conservative treatment, necessitates significant limitation of physical activity, or constitutes increased risk of illness, injury or infection• Any unresolved acute illness or injury that would impair one's duty performance during the duration of the deployment• Any medical condition that requires durable medical equipment or appliances or that requires periodic evaluation/treatment by medical specialists not readily available in theater
	Conditions Affecting Force Health Protection <ul style="list-style-type: none">• Physical or psychological conditions causing inability to effectively wear PPE• Conditions that prohibit immunizations or the use of FHPPPs required for deployment

Unresolved Health Conditions Requiring Care or Affecting Performance

- Any chronic medical condition requiring frequent clinical visits, fails to respond to adequate conservative treatment, or necessitates significant limitation of physical activity
- Absence of dental exam in past 12 months
- Pregnancy
- Condition requiring durable medical equipment or appliances, or periodic evaluation or treatment by medical specialists not readily available in theater
- Heat stroke - history of heat stroke, no multiple episodes, no persistent sequelae or organ damage and no episode within past 24 months
- Meniere's disease or other vertiginous/motion sickness disorders, unless well controlled on meds available in theater
- Unresolved acute or chronic illness or injury that would impair duty performance
- Cancer requiring continuing treatment or evaluations
- Precancerous lesions requiring treatment and/or evaluation, but not treated or evaluated
- Any medical condition requiring surgery or for which surgery has been performed and requires rehab or additional surgery to remove devices
- Recent surgery requiring follow up during deployment, or surgeon hasn't cleared/released
- Surgery (open or laparoscopic) within 6 weeks of deployment
- Renolithiasis - recurrent or currently symptomatic
- Musculoskeletal condition that significantly impairs performance
- Obstructive Sleep Apnea (OSA) of any severity, if symptomatic despite treatment
- OSA with AHI and/or RDI ≥ 30 /hour post treatment
- OSA with AHI and/or RDI < 30 /hour post treatment does not require waiver except to Afghanistan or Yemen
- OSA, Mild (AHI and/or RDI < 15 /hour with or without CPAP treatment is deployable
- Acute exacerbation of a physical or mental health condition that could significantly affect duty performance

Conditions That Could Cause Sudden Incapacitation

- Recurrent loss of consciousness for any reason
- Any medical condition that could result in sudden incapacitation
- Stroke within past 24 months
- Seizure disorders - either within past year or on anticonvulsants, if stable must be seizure free for 6 months
- Diabetes mellitus type I or II on pharmacotherapy with A1C less than 7.0
 - Type 1 diabetes or insulin requiring type 2 diabetes
 - Type 2 diabetes, on oral agents only, with no change in meds in past 90 days, A1C < 7.0
 - Framingham 10 year $> 15\%$ WAIVER REQUIRED
 - Framingham 10 year $< 15\%$ NO WAIVER REQUIRED

Pulmonary Disorders

- Asthma with forced expiratory volume-1 (FEV-1) of less than or equal to 50 percent of predicted FEV-1 despite appropriate therapy and that has required hospitalization at least 2 times in the last 12 months, or requires daily systemic (not inhaled) steroids

Infectious Disease

- Active TB
- Latent TB - negative chest X-ray within 90 days of deployment, documentation of counseling
- Active known transmissible blood-borne disease - include full test panel including all antigens, antibodies and viral load
- HIV positive with presence of progressive clinical illness or immunological deficiency

Sensory Disorders

- Hearing loss - individual must have sufficient unaided hearing to perform duties safely, within IAW Service guidelines. Hearing aids do not preclude deployment

- Hearing level no greater than 30dB for either ear with no individual level greater than 35dB at these frequencies and no greater than 55dB at 4000 Hz
- Hearing level no greater than 30dB at 500 Hz; 25dB at 1000 and 2000 Hz; and 35dB at 4000 Hz in the better ear
- Vision loss - Best corrected visual acuity must meet job requirements to safely perform duties
- Refractive eye surgery - determination by ophthalmologist or optometrist that treatment is complete
- Ophthalmic steroid drops post procedure
- Photorefractive Keratectomy - non deployable for 90 days post-PRK, 30 days post-LASIK
- Tracheostomy or aphonia

Cardiovascular Disorders

- Hypertension, controlled and stable 90 days (Single episode hypertension found on predeployment physical should be accompanied by serial blood pressure checks to ensure hypertension is not persistent)
- Symptomatic coronary artery disease
- MI within last year
- Cardiac dysrhythmias or arrhythmias, either symptomatic or requiring medical or electrophysiologic control
- Coronary artery bypass graft in last year
- Coronary artery angioplasty in last year
- Carotid endarterectomy in last year
- Other arterial stenting in last year
- Aneurysm repair in last year
- Heart failure
- Hyperlipidemia controlled with meds regimen, stable for 90 days (TC < 240, LDL < 160, Trig < 500)
- Morbid obesity
- BMI > 40
- BMI > 35 with serious comorbidities like diabetes, OSA, cardiomyopathy, joint disease

Mental Health Disorders

- Psychotic or bipolar disorders
- Psychiatric disorders under treatment with fewer than 3 months of demonstrated stability
- Clinical psychiatric disorders with residual symptoms that impair duty performance
- Mental health conditions that pose a substantial risk for deterioration or recurrence of impairing symptoms in the deployed environment
- Substance abuse disorders not in remission
- Chronic medical conditions that require ongoing treatment with antipsychotics, lithium, or anticonvulsants

Medications

- | | |
|--|---|
| <ul style="list-style-type: none"> • Therapeutic anticoagulants: <ul style="list-style-type: none"> ○ warfarin • Platelet aggregation inhibitors or reducing agents: <ul style="list-style-type: none"> ○ clopidogrel ○ anagrelide ○ dabigatran • Hematopoietics: <ul style="list-style-type: none"> ○ filgrastim ○ sargramostim ○ erythropoietin • Antihemophilics: <ul style="list-style-type: none"> ○ Factor VIII ○ Factor IX • Antineoplastics: | <ul style="list-style-type: none"> • Immunosuppressants (chronic systemic steroids) • Biologic response modifiers (immunomodulators): <ul style="list-style-type: none"> ○ abatacept ○ adalimumab ○ anakinra ○ etanercept ○ infliximab ○ leflunomide, etc. • Anti-psychotics (except quetiapine "Seroquel" 25 mg at bedtime for sleep): • Antimanic (bipolar) agents: <ul style="list-style-type: none"> ○ lithium, etc. |
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- antimetabolites:
 - methotrexate
 - hydroxyurea
 - mercaptopurine
- alkylators:
 - cyclophosphamide
 - melphalan
 - chlorambucil
- antiestrogens:
 - tamoxifen, etc.
- aromatase inhibitors:
 - anastrozole
 - exemestane, etc.
- medroxyprogesterone (except as contraception):
 - interferons
 - etoposide
 - bicalutamide
 - bexarotene
 - oral tretinoin (Vesanoid)
- Anticonvulsants: (except those listed below)
NO WAIVER REQUIRED:
 - Valproic acid:
 - Depakote, Depakote ER, Depacon, etc.
 - Carbamazepine:
 - Tegretol
 - Tegretol XR, etc.
 - Varenicline:
 - Chantix
 - Opioids, opioid combination drugs, or tramadol, chronic use
 - Insulin and exenatide (Byetta)